

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ES</i>		04/10/01
O.I.P.E. CLASSIFIER		43	5/4/01
FORMALITY REVIEW	<i>EL</i>	706	5-31-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11/1/01
2	2/1/02
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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4-3  
 5-31-01